| POSITION | INITIALS | ID NO. | DATE |
|---|---|---|---|
| | | | |
| FEE DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | | | |
| FORMALITY REVIEW | | | |
| RESPONSE FORMALITY REVIEW | | | |
| | | | |

## INDEX OF CLAIMS

| | | | | |
|---|---|---|---|---|
| ✔ | ............................. Rejected | N | ............................. Non-elected |
| = | ............................. Allowed | I | ............................. Interference |
| — | (Through numeral)... Canceled | A | ............................. Appeal |
| ÷ | ............................. Restricted | O | ............................. Objected |

BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)